

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR

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Name of Offering (Chock if this is an amendment and name has changed, and indicate change.) Heartland Energy Group, Inc.	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment) THOE
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A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	07041319
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
3640 Government ST. Suite B Alexandria, Louisiana 71302	318-449-9490
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices) N/A	PROCESS
Brief Description of Business	L KOCES
Alternitive Energy	
	JAN 2 2 200
Type of Business Organization	
corporation limited partnership, already formed other (p	please specify): Homson Financial

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Fallure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

A BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Promoter Check Box(es) that Apply: Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Roy Thomhill Business or Residence Address (Number and Street, City, State, Zip Code) 3640 Government ST. Suite B Alexandria, Louisiana 71302 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Beneficial Owner Director Check Box(es) that Apply: Promoter Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) (Number and Street, City, State, Zip Code) Business or Residence Address Check Box(es) that Apply: Promoter General and/or Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer Director General and/or **Managing Partner** Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary)

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1.	Has the	issuer sol	d, or does t	he issuer i	ntend to se	ell to non-	accredited	invectors i	n this offer	ina?		Yes ⊠	No
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2.	What is	the minin	num investr			n Appendix						s 10	0.00
۷.	WHAT	tile ilitarii	num mvesn	neni, triat w	oni de acce	spicu iroin	any muivi	10at /		*************	*****	Yes	No
3.	Does th	e offering	permit joir	it ownershi	ip of a sing	gle unit?	***************************************	***************	••••••	*****************	•••••••		
4.			tion reques										
<u>.</u>	If a pers or states a broke	son to be list, s, list the n	nilar remune sted is an as ame of the l , you may s	sociated pe broker or de set forth th	erson or age caler. If m	ent of a bro ore than fiv	ker or deale e (5) perso	er regist <mark>e</mark> re ns to be lis	d with the S ted are asso	SEC and/or	with a state	•	
Full	Name (Last name	first, if ind	lividual)	· · · · · · · · · · · · · · · · · · ·				- , -, -, -, -, -, -, -, -, -, -, -, -, -,				
Bus	Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer												
Nan	ne of As	sociated B	roker or De	aler									
Stat	es in W	nich Person	n Listed Ha	s Solicited	or Intends	s to Solicit	Purchasers						······································
	(Check	"All State	s" or check	individual	States)		•••••	····				☐ Al	l States
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	MT	NE)	[NV]	NH	NJ	[NM]	NY	NC	ND	(OH)	OK)	OR	PA
	RI	SC	SD	N	TX	UT	VT	VA	WA	WV	WI	WY	PR
Full	Name (Last name	first, if ind	ividual)									
Bus	iness or	Residence	Address (Number an	d Street, C	City, State,	Zip Code)	···		·	····	<u>-</u>	
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Stat	es in Wh	ich Person	n Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All State	s" or check	individual	States)							☐ Al	1 States
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Bus	iness or	Kesidence	Address ()	Number an	a str ect , C	ity, State,	Zip Code)						
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State	es in Wh	ich Persor	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers		 -				
	(Check	"All State:	s" or check	individual	States)	*************		~~{~~~~~	*******	********		☐ All	l States
	AL	AK	ΑZ	AR	CA	CO	CT	DE	DC	FL	GA)	HI	(ID)
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	MT	NE	\overline{NV}	NH	NJ	NM	NY	NC	ND	OH	OK	OR	PA
	RI	[SC]	SD	TN	TX	UT	VT	VA	WA	WV	WI	[WY]	PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	5	s
	Equity		s
	✓ Common ☐ Preferred		
	Convertible Securities (including warrants)		•
	Partnership Interests		·
	·		
	Other (Specify)		
			5_0.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number	Aggregate Dollar Amount
		Investors	of Purchases
	Accredited Investors		\$
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		*
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504	common	s
	Total		\$ 0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		s 500.00
	Printing and Engraving Costs		s 300.00
	Legal Fees	سع	\$ 2,000.00
	Accounting Fees		\$ 1,500.00
	Engineering Fees	_	\$
	Sales Commissions (specify finders' fees separately)	_	\$ 0.00
	Other Expenses (identify)		s 3,000.00
	Total		s 7,300.00
	. 044		·

C OFFERING PRICE NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	b. Enter the difference betwee and total expenses furnished in proceeds to the issuer."	response to Part C — C	Juestion 4.a. This	s aimerence i	2 rus animeren Bross			\$
5.	Indicate below the amount of cach of the purposes shown. check the box to the left of the proceeds to the issuer set fort	If the amount for any estimate. The total of	y purpose is not lithe payments list	known, turn ed must equ	IZU SU EZUMPTE THE			
		1				P	ayments to	
							Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees	1				J \$	300,000.00	\$ 200,000.00
	Purchase of real estate					□ \$		\$
	Purchase, rental or leasing ar	ed installation of mac	hinery					Z \$ 200,000.00
	Construction or leasing of pl	ant huildings and fac	ilities		***************************************			20,000,00
	Acquisition of other business	ses (including the val	ue of securities i	nvolved in t		_		
	offering that may be used in issuer pursuant to a merger)	exchange for the asse	ts or securities o	f another		□ \$		72,700.00 72,700.00 1 3 1 1 3 1 1 3 1 1 1 1 1 1 1 1 1 1
	Repayment of indebtedness.		***************************************					_
	Working capital	1					190,000.00	
	Other (specify):							
	Other (specify).	1				_		-
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	Column Totals							
	Total Payments Listed (column	i mn totals added)	••••••				∑ s <u>a</u>	2,700.00
(a)	To Anti-Control of the Control of th		D. FEDERA	L'SIGNATU	JRE 1981 Carlotte	OLV S		為過過學過
sig	e issuer has duly caused this not mature constitutes an undertaki e information furnished by the	ing by the issuer to fur	mish to the U.S. S	Securities ar	id Exchange Comm	issio	n, upon writte	le 505, the following n request of its staff.
	suer (Print or Type)	I .	Signature	01	×.1	Dat		
H	eartiand Energy Group, Inc.	_	/ Jun -	Bu.		יוט ו	/10/2007	
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- ATTENTION Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

No Yes Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule? X See Appendix, Column 5, for state response. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied. The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person. Date Signature Issuer (Print or Type) 01/10/2007 Heartland Energy Group, Inc. Name (Print or Type) Roy Thomhili

President & CEO

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX 2 3 1 4 5 Disqualification Type of security under State ULOE intend to sell and aggregate (if yes, attach to non-accredited offering price Type of investor and explanation of investors in State offered in state amount purchased in State waiver granted) (Part B-Item 1) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) Number of Number of Accredited Non-Accredited State Yes No Investors **Investors** Yes No Amount Amount AL ΑK ΑZ AR CACO CT DE DC FL GA HI ID ΙL ΙN ΙA KS ΚY LA ME MD ł 1 MA ΜI MN

MS

APPENDIX

1	2		3			4		5		
	to non-a investor	to sell accredited is in State 1-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)				Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
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MT										
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í	to non-a	2 to sell accredited as in State	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)				under St (if yes, explan waiver	Disqualification under State ULOI (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State Yes		Yes No	f L	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	